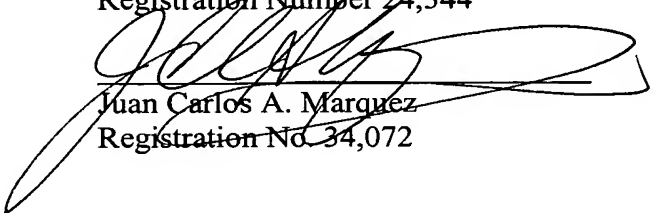




- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [] A check in the amount of \$ _____ to cover the excess claim fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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January 25, 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

ITO et al

Application Number: 10/648,344

Filed: August 27, 2003

**For: MAGNETIC HEAD FOR PERPENDICULAR
RECORDING**

ATTORNEY DOCKET NO. HITA.0427

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) **Art Unit 2652**
) **Examiner Jefferson A. Evans**
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**Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.116

Sir:

This is in response to the Office Action mailed on December 14, 2005, the period of response to which is set to expire on March 14, 2006. Please amend the above-referenced application as follows: